Fill in this information to identify your cas	e:
United States Bankruptcy Court for the:	
Eastern District of Michigan	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12
*	☐ Chapter 13

FILED '19 MAY 21 FH3:2 JS BANKRUPTCY MIE-DEI

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself	1	<i>2</i> .
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jasmine First name C Middle name Johnson Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	None First name None Middle name	First name
	Include your married or maiden names.	None Last name	Last name
		None First name	First name
		None Middle name None	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 9 6 1 4 or 9 xx - xx	xxx - xx or 9 xx - xx

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 1

	About Debtor 1:		About Debtor 2 (Spouse On	ly in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in	have not used any business	names or EINs.	☐ I have not used any business names or EINs.			
the last 8 years	Business name		Business name			
Include trade names and doing business as names						
doing business as names	Business name		Business name			
	EIN	<u> </u>	EIN			
	EIN		EIN			
s. Where you live			If Debtor 2 lives at a differe	nt address:		
. Tilloto you hvo						
	8507 Chalmers Ave		•			
ಕ	Number Street		Number Street			
	Access Of Contract					
	Warren	MI 48507				
	City	State ZIP Code	City	State ZIP Cod		
	Macomb					
	County		County			
	If your mailing address is differ above, fill it in here. Note that the any notices to you at this mailing	ne court will send	If Debtor 2's mailing addres yours, fill it in here. Note th any notices to this mailing ad	at the court will send		
	Number Street		Number Street			
	P.O. Box		P.O. Box	and the second s		
	City	State ZIP Code	City	State ZIP Code		
. Why you are choosing	Check one:		Check one:			
this district to file for bankruptcy	Over the last 180 days before I have lived in this district long other district.	e filing this petition, ger than in any	Over the last 180 days be I have lived in this district other district.	efore filing this petition, longer than in any		
	l have another reason. Explai (See 28 U.S.C. § 1408.)	in.	☐ I have another reason. E. (See 28 U.S.C. § 1408.)	xplain.		
				A LANGE AND A STATE OF THE STAT		
		,		······································		

Jasmir	ne C. Joh	nson		
First Name	Middle Name		Last Name	

ase number (#known)

-	
	-

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file under	Check on for Bankr Chap Chap Chap Chap Chap	uptcy (F iter 7 iter 11 iter 12	a brief description of ead orm 2010)). Also, go to	ch, see <i>Notic</i> e the top of pa	e Required by 11 to	U.S.C. § 342(b) for Individuals Filing eappropriate box.
8.	How you will pay the fee	local yours subm with I nee Appl I req By lates pay to	court fi self, you itting y a pre-p ad to pa ication uest th w, a ju than 15 the fee	or more details about u may pay with cash, rour payment on your rinted address. The fee in installing for Individuals to Pay that my fee be waived dge may, but is not resolved of the official power at the pay that my fee fee waived dge may, but is not resolved to the official power at the pay that my fee be waived the official power may but is not resolved to the official power may with the maximum may be the maximum may be the maximum may be the maximum maximum may be the maximum	how you m cashier's cl behalf, you nents. If you The Filing if (You may equired to, werty line that u choose th	ay pay. Typically neck, or money or a thorney may p u choose this opt Fee in Installment request this optivative your fee, a at applies to your is option, you mis	ck with the clerk's office in your or, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the onts (Official Form 103A). On only if you are filing for Chapter 7. Ind may do so only if your income is a family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	□ No ☑ Yes.	District	Eastern	When		Case number
10	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District		When	MM/DD/YYYY	Case number, if known
11	. Do you rent your residence?	☐ No. ☑ Yes.	Has you No	line 12. our landlord obtained an o. Go to line 12. es. Fill out <i>Initial Stateme</i> rt of this bankruptcy pet	ent About an		

Official Form 101

Case number	(if known)	
Case number	(if known)	

Part 3:

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any		
Number Street		

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

Z No

☐ Yes

- No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?	
If immediate attention is	needed, why is it needed?
Where is the property?	Number Street

Voluntary Petition for Individuals Filing for Bankruptcy

City

page 4

ZIP Code

State

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether vou have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

> If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

My physical disability causes me ☐ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case number (if known)

	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you nave:	No. Go to line 16b. Yes, Go to line 17.				
		16b. Are your debts primar money for a business or in	ily business debts? Business debts a vestment or through the operation of the b	are debts that you incurred to obtain ousiness or investment.		
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.				
		16c. State the type of debts you	owe that are not consumer debts or busi	iness debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	napter 7. Go to line 18.			
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	excluded and	☑ No				
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes				
18.	How many creditors do	2 1-49	1,000-5,000	25,001-50,000		
	you estimate that you	50-99	5 ,001-10,000	50,001-100,000		
	owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000		
19.	How much do you	2 \$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion		
	estimate your assets to	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion		
	be worth?	☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion		
20.	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion		
		\$500,001-\$500,000	\$100,000,001-\$500 million	☐ More than \$50 billion		
Pa	rt 7: Sign Below					
Fo	or you	I have examined this petition, a correct.	nd I declare under penalty of perjury that	the information provided is true and		
		If I have chosen to file under Coof title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ich chapter, and I choose to proceed		
		If no attorney represents me ar this document, I have obtained	nd I did not pay or agree to pay someone and read the notice required by 11 U.S.C	who is not an attorney to help me fill out C. § 342(b).		
		I request relief in accordance w	rith the chapter of title 11, United States C	Code, specified in this petition.		
		I understand making a false stawith a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	ult in fines up to \$250,000, or imprisonme	g money or property by fraud in connection ent for up to 20 years, or both.		
		* Lamino	/ ×			
		Signature of Debtor 1	Signatur	re of Debtor 2		
		v	Execute			

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

Debtor 1

Jasmine	C. Johnson	

Case number (# known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date				
Signature of Attomey for Debtor		MM	1	DD	/YYYY
Printed name					
Firm name					
Number Street					
City	State	ZIP	Code		
Contact phone	Email addres	3S			

Last Name

For you if you are filing this bankruptcy without an attornev

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action consequences?	on with long-term financial and legal
□ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison	
☑ No ☑ Yes	
Did you pay or agree to pay someone who is not an attor	rney to help you fill out your bankruptcy forms?
☐ Yes. Name of Person	aration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the risk have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I or	nat filing a bankruptcy case without an
* Lormine I dompore *	
Signature of Debtor 1	Signature of Debtor 2
Date MM / DD / YYYY	Date MM / DD / YYYY
Contact phone <u>348-843-5166</u>	Contact phone
Cell phone	Cell phone
Email address Jasminejaden 2011a	Email address

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 8

Certificate Number: 15725-MIE-CC-032067446



CERTIFICATE OF COUNSELING

I CERTIFY that on December 24, 2018, at 10:22 o'clock AM EST, Jasmine Johnson received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

/s/Melissa James December 24, 2018 By: Date: Name: Melissa James Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:	
Debtor 1 Jasmine C. Johnson First Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Eastern District of Michigan	Check if this is an
Case number (If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	ormation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for	
information. Fill out all of your schedules first; then complete the information on this form. If you are filing amende your original forms, you must fill out a new Summary and check the box at the top of this page.	a schedules after you file
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$ 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	., *
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 16,378.21
1c. Copy line 63, Total of all property on Schedule A/B	·· \$ 16,378.21
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	44.040.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 44,012.00
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	·· + s 24,890.00
	+ \$
Your total liabilities	\$ 68,902.00
Part 3: Summarize Your Income and Expenses	

Copy your combined monthly income from line 12 of Schedule I

Copy your monthly expenses from line 22c of Schedule J

1,768.00

2,650.00

4. Schedule I: Your Income (Official Form 106I)

5. Schedule J: Your Expenses (Official Form 106J)

Dο	htor	4

First Name	***	&iddle Nam	e

Last Name

Case number (if known)	
------------------------	--

Part 4: Answer These Questions for Administrative and Statistical Re
--

6.	Are you	filing for	bankruptcy	under	Chapters	7,	11, o	г 1	3?
----	---------	------------	------------	-------	----------	----	-------	-----	----

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☑ Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$___1,768.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 0.00

9d. Student loans. (Copy line 6f.) \$_______

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ 0.00

E.D. C. M. C.	C			
Fill in this ir	formation to identify your case and this	ming:		
Debtor 1	Jasmine C. Johnson First Name Middle Name	Last Name		
Debtor 2	First Name Microse Name	Last Name		
(Spouse, if filing)	First Name Middle Name	Last Name		
United States	Bankruptcy Court for the: Eastern District of M	ichigan		
Case number				Check if this is an
				amended filing
Official	Form 106A/B			
		_		
	dule A/B: Property	List an asset only once. If an asset fits in more t		12/15
responsible write your	e for supplying correct information. If mo name and case number (if known). Answ	te and accurate as possible. If two married people re space is needed, attach a separate sheet to this er every question. Land, or Other Real Estate You Own or Hav	s form. On the top of a	th are equally ny additional pages,
1. Do you o	wn or have any legal or equitable interes	t in any residence, building, land, or similar prope	erty?	
	So to Part 2.			
☐ Yes. '	Where is the property?	What is the property? Check all that apply.	Do not deduct secured cla	ima ar overnations. But
		☐ Single-family home	the amount of any secured Creditors Who Have Claim	i claims on <i>Schedule D:</i>
1.1 Str	eet address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		
		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
·		Land	\$	\$
		☐ Investment property ☐ Timeshare	Describe the nature of	of your ownership
Cit	y State ZIP Code	Other	interest (such as fee the entireties, or a life	
		Who has an interest in the property? Check one.		,
		Debtor 1 only		
Cc	ounty	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this it	em, such as local	
lf vous ove	n or have more than one, list here:	property identification number:		
11 you ow	To have more than one, her here.	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
4.0		Single-family home	the amount of any secure Creditors Who Have Clair	
1.2. <u>St</u>	reet address, if available, or other description	☐ Duplex or multi-unit building☐ Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		Land	\$	\$
		Investment property Timeshare	Describe the nature	
Ci	ty State ZIP Code	Other	interest (such as fee the entireties, or a lif	simple, tenancy by e estate), if known.
		Who has an interest in the property? Check one.		
		Debtor 1 only		
Co	punty	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	williams highers
		Other information you wish to add about this ite property identification number:	m, such as local	

		What is the property? Check all that apply.	Do not deduct secured cla	ims or exemptions. Put
1.3.		☐ Single-family home	the amount of any secured Creditors Who Have Clain	
	Street address, if available, or other description	Duplex or multi-unit building	Current value of the	
		Condominium or cooperative	entire property?	portion you own?
		Manufactured or mobile home Land	\$	\$
		☐ Land ☐ Investment property	•	
	City State ZIP Cod		Describe the nature of	
		Other	interest (such as fee to the entireties, or a life	
		Who has an interest in the property? Check one.		
	County	_ Debtor 1 only		
	County	Debtor 2 only	O objectivitativa se	
		Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
		At least one of the debtors and another	,	
		Other information you wish to add about this ite property identification number:		
			!	
Add	the dollar value of the portion you own for	all of your entries from Part 1, including any entrie	s for pages	s 0.00
vou	own, lease, or have legal or equitable inte	rest in any vehicles, whether they are registered or	not? Include any vehicles	s
Car	n that someone else drives. If you lease a vers, vans, trucks, tractors, sport utility vehic	rest in any vehicles, whether they are registered or nicle, also report it on Schedule G: Executory Contracts les, motorcycles	not? Include any vehicles and Unexpired Leases.	S
Car:	n that someone else drives. If you lease a ver s, vans, trucks, tractors, sport utility vehic No	icle, also report it on Schedule G: Executory Contracts	not? Include any vehicles and Unexpired Leases.	S
Owi	n that someone else drives. If you lease a vel s, vans, trucks, tractors, sport utility vehic No Yes	icle, also report it on Schedule G: Executory Contracts	not? Include any vehicle: and Unexpired Leases. Do not deduct secured cla	
owi Cars	n that someone else drives. If you lease a velos, vans, trucks, tractors, sport utility vehice No Yes Make:	icle, also report it on Schedule G: Executory Contracts les, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clause amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i>
Owi	n that someone else drives. If you lease a veh s, vans, trucks, tractors, sport utility vehic No Yes Make: Model:	nicle, also report it on <i>Schedule G: Executory Contracts</i>	and Unexpired Leases. Do not deduct secured classes the amount of any secure Creditors Who Have Claim	aims or exemptions. Put id claims on <i>Schedule D:</i> ms Secured by Property.
Owi	n that someone else drives. If you lease a velos, vans, trucks, tractors, sport utility vehice. No Yes Make: Model: Year:	who has an interest in the property? Check one.	Do not deduct secured classes the amount of any secure Creditors Who Have Clair	aims or exemptions. Put Id claims on <i>Schedule D:</i> Ims Secured by Property. Current value of th
owi Cars	n that someone else drives. If you lease a veh s, vans, trucks, tractors, sport utility vehic No Yes Make: Model:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	and Unexpired Leases. Do not deduct secured classes the amount of any secure Creditors Who Have Claim	aims or exemptions. Put id claims on <i>Schedule D:</i> ms Secured by Property.
owi Cars	n that someone else drives. If you lease a velos, vans, trucks, tractors, sport utility vehice. No Yes Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured classes the amount of any secure Creditors Who Have Clair	aims or exemptions. Put Id claims on <i>Schedule D:</i> Ims Secured by Property. Current value of th
owi Cars	n that someone else drives. If you lease a veh s, vans, trucks, tractors, sport utility vehic No Yes Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured classes. Do not deduct secured classes the amount of any secure Creditors Who Have Classes Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. Current value of th portion you own?
Owi	n that someone else drives. If you lease a veh s, vans, trucks, tractors, sport utility vehice No Yes Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured classes. Do not deduct secured classes the amount of any secure Creditors Who Have Class Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. Current value of th portion you own?
owi	Make: Model: Approximate mileage: Other information: Mo wan or have more than one, describe here	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of th portion you own?
Owi	Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clithe amount of any secure	aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
Cars Zi 3.1.	Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	aims or exemptions. Put id claims on <i>Schedule D:</i> ms <i>Secured by Property.</i> Current value of th portion you own? \$
Owi	that someone else drives. If you lease a vehalo, vans, trucks, tractors, sport utility vehice. No Yes Make: Model: Year: Approximate mileage: Other information: ou own or have more than one, describe here. Make:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
Owi	n that someone else drives. If you lease a veh s, vans, trucks, tractors, sport utility vehice No Yes Make: Model: Year: Approximate mileage: Other information: Ou own or have more than one, describe here Make: Model: Model:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
Cars Zi 3.1.	Make: Approximate mileage: Other information: Make: Model: Year: Approximate mileage: Other information: Make: Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
Cars 2 3.1.	n that someone else drives. If you lease a vehal, vans, trucks, tractors, sport utility vehice. No Yes Make: Model: Year: Approximate mileage: Other information: Ou own or have more than one, describe here. Make: Model: Year: Approximate mileage: Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D. ms Secured by Property. Current value of tl portion you own? \$
Cars 2 3.1.	n that someone else drives. If you lease a vehal, vans, trucks, tractors, sport utility vehice. No Yes Make: Model: Year: Approximate mileage: Other information: Ou own or have more than one, describe here. Make: Model: Year: Approximate mileage: Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$

Jasmine C. Johnson

.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured	
	Model:	Debtor 1 only	Creditors Who Have Clain	
	Year:	Debtor 2 only	O	O
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	onine property.	p
	Other information:		¢	\$
		☐ Check if this is community property (see instructions)	Φ	Ψ
1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
۲.		Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Model:	Debtor 2 only	Creditors vario mave Claim	is secured by Froperty.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see	\$	\$
		instructions)		
		and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor		
n N Y	nples: Boats, trailers, motors, personal	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		d claims on Schedule D:
n N Y	nples: Boats, trailers, motors, personal lo es Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clause amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of th
N Y	nples: Boats, trailers, motors, personal lo es Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$

Jasmine C. Johnson First Name Middle Name

Last Name

Dar	H	7	•

Describe Your Personal and Household Items

Last Name

Do you own or have any le	ogal or equitable interest in any of the following items?	Current va portion yo Do not deduc or exemption	u own? ct secured claims
6. Household goods and t	furnishings		
Examples: Major applian	ces, furniture, linens, china, kitchenware		
□ No			
	Major appliances, furniture, linens, kitchenware	\$	600.00
7. Electronics			
collections; e	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games		
No Yes. Describe			875.00
tes, pescripe	Televisions, cell phones, printer, computer, playstation	\$	073.00
8. Collectibles of value			
Examples: Antiques and stamp, coin, . No	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
Yes. Describe		\$	
9. Equipment for sports a			
Examples: Sports, photo and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
☑ No			
Yes. Describe		\$	
10. Firearms			
Examples: Pistols, rifles,	shotguns, ammunition, and related equipment		
☑ No			
Yes. Describe		\$	
11. Clothes			
_ ` ` ` `	thes, furs, leather coats, designer wear, shoes, accessories		
☐ No ☐ Yes. Describe	Everyday clothes, coats, shoes, accessories	\$	550.00
12. Jewelry Examples: Everyday jew gold, silver	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
□ No			
Yes. Describe	everyday jewelry	\$	75.00
13. Non-farm animals	• • • • • • • • • • • • • • • • • • •		
Examples: Dogs, cats, b	pirds, horses		
☑ No			
Yes. Describe		\$	
14. Any other personal and	d household items you did not already list, including any health aids you did not list		
☑ No	20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
Yes. Give specific information		\$	
	f all of your entries from Part 3, including any entries for pages you have attached		2,100.00
	umber here	L *	2,100.00

Debtor	1

Jasmine C.	Johnson	
First Name	Middle Name	Last Name

Case number (if known)	

Down	4.
100	

Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your petition	
☑ No			
☐ Yes		Cash:	\$
and other s		ints; certificates of deposit; shares in credit unions, brokerage houses ultiple accounts with the same institution, list each.	is
☐ No ☑ Yes		Institution name:	
	17.1. Checking account:	Pre-paid Net Spend card for employment check	\$50.00
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		
	17.7. Other financial account:		
	17.8. Other financial account:		
	17.9. Other financial account:		
Examples: Bond funds	, or publicly traded stocks , investment accounts with brok	erage firms, money market accounts	
☑ No ☑ Yes	Institution or issuer name:		
			_ \$
			- \$
		erated and unincorporated businesses, including an interest in	
an LLC, partnership,	and joint venture		•
an LLC, partnership, ☑ No		% of ownership:	`.
an LLC, partnership,	and joint venture Name of entity:	% of ownership:	\$ \$

Non-negotiable instrume ✓ No	ents are those you car	ks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.		
Yes. Give specific information about	Issuer name:			
them				
			\$ \$	
			*	,
 Retirement or pension Examples: Interests in II 	*	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
□ No				•
Yes. List each account separately.	Type of account:	Institution name:		
	401(k) or similar plan:	FCA Chrysler	\$	400.00
	Pension plan:		\$	
	IRA:		¢	
			Ψ	
	Retirement account:		¢	
	Keogh:	FCA Profit sharing	Ψ	3,342.21
	Additional account:	1 OAT TOIR SHaring	a	-,
• •			\$	
	prepayments d deposits you have n with landlords, prepai In Electric: Gas: Heating oil:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have n with landlords, prepai In Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others I No Yes	prepayments d deposits you have n with landlords, prepai In Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual: Intal unit: Of money to you, either for life or for a number of years) scription:	\$\$ \$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have n with landlords, prepai In Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual: Intal unit: Of money to you, either for life or for a number of years)	\$	

Jasmine C. Johnson First Name Middle Name

Last Name

26 U.S.C. §§ 530(b)(1), 529A		ount in a qualified ABLE program, or under a qualified b)(1).	state tuition program.	
☑ No	(2), a.i.e 020,	~,(,,		
☐ Yes	Inetitution	name and description. Separately file the records of any in	terests 11 LLS C. 8 521/c	١٠
	mstitution	marile and description. Ocparatory no the records of any in	(CICSIG. 11 C.O.O. g 021(c	<i>,.</i>
	***************************************			\$
				\$
·				\$
25. Trusts, equitable or future in exercisable for your benefit		property (other than anything listed in line 1), and right	s or powers	
2 No				
Yes. Give specific				
information about them				\$
		secrets, and other intellectual property es, proceeds from royalties and licensing agreements		
Yes, Give specific				
information about them				\$
 27. Licenses, franchises, and c Examples: Building permits, e 1 No Yes. Give specific information about them 	exclusive lice	nses, cooperative association holdings, liquor licenses, pr	ofessional licenses	\$
Money or property owed to yo	u?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				
□ No		1		m 101 00
Yes. Give specific information about them, including		2017 federal refund-\$5.386.00	Federal:	\$ 10.486.00
you already filed the	returns	2018 federal refund- \$5,100.00-estimate	State:	\$
and the tax years			Local:	\$
29. Family support Examples: Past due or lump 12 No	sum alimony	, spousal support, child support, maintenance, divorce set	tlement, property settleme	ent
Yes. Give specific inform	ation		Alimony	ф
			Alimony:	\$
			Maintenance:	\$
			Support:	\$ \$
			Divorce settlement:	
		1	Property settlement:	\$
Social Security be	sability insur	ance payments, disability benefits, sick pay, vacation pay, id loans you made to someone else	workers' compensation,	
No				7
Yes. Give specific inform	ation	•		\$
		1		1

Jasmine C. Johnson

Middle Name

Last Name

DODIO! !	First Name	Middle Name	Last Name	Oddo Harrisot (Individual)	
1. Interest	s in insurance	e policies			
Example	es: Health, disa	ability, or life insuran	ce; health savings account (H	SA); credit, homeowner's, or renter's insurance	
No					
Yes.		urance company and list its value	Company name:	Beneficiary:	Surrender or refund value:
					\$
					\$
			######################################		\$
					¥
If you ar	re the beneficia		from someone who has died xpect proceeds from a life inst	urance policy, or are currently entitled to receive	
No					
Yes.	. Give specific	information			
					\$
3 Claime	against third	nartice whother o	not vou have filed a laweuit	or made a demand for payment	
			s, insurance claims, or rights t		
☑ No	,	. ,	, ,		
	. Describe eac	h claim	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
					\$
to set o	ontingent and off claims	i unliquidated clain	ns of every nature, including	counterclaims of the debtor and rights	
☑ No		į			
☐ Yes.	. Describe eac	h claim			•
☑ No	01 10				
∟ Yes.	. Give specific	information			, , , \$
as Add the	a dollar value	of all of your entris	s from Part 4 including any	entries for pages you have attached	
		_			\$ 14,278.21
				•	
16 F2					
art 5:	Describe	Any Business-	Related Property You	Own or Have an Interest In. List any	real estate in Part 1.
37. Do you	own or have a	any legal or equital	ole interest in any business-	related property?	
	Go to Part 6.		•	• • •	
☐ Yes.	. Go to line 38.				
			•		Current value of the
					portion you own?
			•		Do not deduct secured claims
					or exemptions.
	its receivable	or commissions y	ou already earned		
☑ No	;				`
☐ Yes.	. Describe	*			¢
					\\ \P
		rnishings, and sup	•	anabinan suga talanbanan dasta sheka eterler ista t	_
_ `	s. business-relai	ieu computers, softwar	e, moderns, printers, copiers, fax n	nachines, rugs, telephones, desks, chairs, electronic device	95
✓ No	Death:				
₩ Yes	. Describe				\$
		L,,			2

Jasmine C. Johnson

Lest 144IIIC	made stalle Last House		
40 Blackbarn Shirting	quipment, supplies you use in business, and tools o	of warm franks	•
-	juipment, supplies you use in business, and tools c	or your trade	
☑ No ☐ Yes. Describe			
Tes. Describe	,		\$
**			
41. Inventory			· ·
42 140			· Programme
☐ Yes. Describe			\$
(a lata a a ta la a a a ta a a a ta			
42. Interests in partnersh ☑ No	ps or joint ventures		
Yes. Describe			•
Tes. Describe	Name of entity:	% of ownership:	
		%	\$
			\$
		%	a
43. Customer lists, mailin	g lists, or other compilations		
☑ No	•		
Yes. Do your lists	include personally identifiable information (as defin	ed in 11 U.S.C. § 101(41A))?	
☑ No			" " \$
Yes. Desc	ribe		\$
			Y
44. Any business-related	property you did not already list		
☑ No			
Yes. Give specific			\$
information			\$
			т т
			3
			\$
		·	\$
			\$
45 Add the dollar value	of all of your entries from Part 5, including any entri	es for pages you have attached	\$ 0.00
	number here		\$
	ny Farm- and Commercial Fishing-Related Pr	operty You Own or Have an Interest I	n.
If you own o	r have an interest in farmland, list it in Part 1.		
40 Da ven ann an bana	ny legal or equitable interest in any farm- or comm	oveial fighing valeted property?	
No. Go to Part 7.	ny legal or equitable interest in any larin- or conline	ercial fishing-related property :	
Yes. Go to line 47.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
47. Farm animals			or witeriphotos
Examples: Livestock, p	oultry, farm-raised fish		
₩ No			
☐ Yes			
			\$

Debtor 1	Jasmine C	Johnson			С	ase number (if known)		
	First Name	Middle Name	Last Name			,		
48 Crops-	either growing	or harvested						
☑ No								
Yes	. Give specific						\$	
49. Farm a ı			ents, machinery, fixture					
No.	,							
☐ Yes							 \$	
so Earm a	i nd fishing sun	olies, chemicals	and food					
□ No	nu namny aup	mes, chemicais	, and leed					
	·						, , , , , , , , , , , , , , , , ,	
							\$	
V No		_	ated property you did a					
	s. Give specific rmation						\$	
		of all of your ent	ries from Part 6, includ	ling any en	tries for pages	•	\$	0.00
ior Par	t o, write that i	lumber nere				7	L	
	have other press: Season tickets	operty of any ki	nd you did not already	list?		You Did Not List Above		
	s. Give specific					***************************************	\$	
info	rmation					e de la companya de l	\$	
•						***************************************	\$	
54. Add the	e dollar value o	f all of your ent	ries from Part 7. Write	that numbe	r here		\$	0.00
		·						
Part 8:	List the T	otals of Eacl	h Part of this Form	n				
55. Part 1:	Total real esta	te, line 2					\$	0.00
56. Part 2:	Total vehicles,	line 5		\$	0.00	-		
57. Part 3:	Total personal	and household	items, line 15	\$	2,100.00	-		
58. Part 4:	Total financial	assets, line 36		\$	14,278.21	-		
59. Part 5:	Total business	-related propert	ty, line 45	\$	0.00	-		
60. Part 6:	Total farm- and	d fishing-related	l property, line 52	\$	0.00	-		
61. Part 7 :	Total other pro	perty not listed	l, line 54	+ \$	0.00	•		
62. Total p	ersonal proper	ty. Add lines 56	through 61	. \$	16,378.21	Copy personal property total	+ \$	16,378.21
				i		.1	<u></u>	
63. Total o	f all property o	n Schedule A/B	. Add line 55 + line 62				\$	16,378.21
							L	

Fill in this in	formation to identify y	our case:		
Debtor 1 .	500mine First Name	Middle Name	D) OS O O Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States I	Bankruptcy Court for the:	District	of	
Case number (If known)	<u> </u>			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	its the exemption to a particular dollar amou uld be limited to the applicable statutory amo	장이면 - 이번() 2017의 1대기업으로 - 사이 (Internal Marie - 1987 - 1987년 -	property is determined to exceed that	amount, your exemption
P	art 1: Identify the Property You Clain	ı as Exempt		
1.	Which set of exemptions are you claiming? ✓ You are claiming state and federal nonbar ✓ You are claiming federal exemptions. 11 to	kruptcy exemptions. 11		
2.	For any property you list on Schedule A/B t	hat you claim as exemp	ot, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	\$ <u>600,00</u>	\$ 600. 00 100% of fair market value, up to any applicable statutory limit	11 US.C 3522C
	Brief description: Line from Schedule A/B:	\$ 875.00	\$ 875. CO 100% of fair market value, up to any applicable statutory limit	11USC \$522 (b) (5)
	Brief Clothes Line from Schedule A/B:	\$550.00	☐ 100% of fair market value, up to any applicable statutory limit	7/16×852 (6)(3)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for case		.)

Case number	(if known)			

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	INI	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	Sewelry 12	\$ 75.60	□ \$ <u>75</u> . 66 □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	Prepaid debt	\$ 50,06	\$ 56.60 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	401h FCA 21	\$ 400.60	100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	Federal refund	\$ 3,3(12.2)	□ \$ 3 242 : 2 \ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$ 10,486.00	\$\lfloor \\ \sqrt{986.60}\$ \$\sqrt{100\% of fair market value, up to any applicable statutory limit}\$	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	,
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case	:			
Debtor 1 Jasmine C. Johnson First Name Middle Na	me Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Na	me Last Name			
United States Bankruptcy Court for the: Eastern Di	strict of Michigan			
Case number (If known)			☐ Check if	f this is an
(II move)			amende	d filing
000 1 1 1 1000				
Official Form 106D	Who Hove Claims Soours	d by Bron	ortv	40/45
	Who Have Claims Secure			12/15
information. If more space is needed, copy additional pages, write your name and cas		uany responsible to and attach it to this i	form. On the top of	any
1. Do any creditors have claims secured by	/ your property? h to the court with your other schedules. You have nothi	na else to report on th	nis form.	
Yes. Fill in all of the information below.	TO THE COURT WATE YOU OTHER SCHEDULES. YOU HAVE NOTH	ig clac to report on a		
Part 1: List All Secured Claims		Column A	Column B	Column C
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1		value of confidence.		\$
Creditor's Name	Describe the property that secures the claim:	\$	\$	ъ
Gradier of Nation				
Number Street	As of the date you file, the claim is: Check all that apply.]		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	-		
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number		e secretario de la compansión de la mondra de la compansión de la compansión de la compansión de la compansión	naggy jame een tii een een ja taata ja
2.2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		A. D. C.		
Number Street		AST TO THE PARTY OF THE PARTY O		
	As of the date you file, the claim is: Check all that apply			
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt	Lact 4 digits of account number			
Date debt was incurred	Last 4 digits of account number	s 0.00		e general de grand per a grand de armente de Seculêncies

n	Rhi	lor	1

Jasmine C. Johnson Case number (if known)_______

P	Additional P After listing a by 2.4, and so	ny entries on this p	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
			Describe the property that secures the claim:	\$	\$:	\$
	Creditor's Name			1		
	Number Street					
			As of the date you file, the claim is: Check all that apply.	}		
			Contingent			
	City	State ZIP Code	Unliquidated			
	,		Disputed			
	Who owes the debt? Ch	eck one.	Nature of lien. Check all that apply.			
	Debtor 1 only					
	Debtor 2 only		An agreement you made (such as mortgage or secured car loan)			•
	Debtor 1 and Debtor 2	only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the deb		☐ Judgment lien from a lawsuit			
	_		Other (including a right to offset)	_		
	☐ Check if this claim r	relates to a				
	community debt					
	Date debt was incurred	-	Last 4 digits of account number			
		e recent resemblication and activises of the contract of the c			periodologico de la constitución	
			Describe the property that secures the claim:	\$	\$	\$
	Creditor's Name			1		
	Number Street					
	Number Street		As of the date you file, the claim is: Check all that apply.	j.		
			Contingent			
			☐ Unliquidated			
	City	State ZIP Code	Disputed			
	Who owes the debt? Ch	neck ope	·			
		iook dite.	Nature of lien. Check all that apply.			
	Debtor 1 only Debtor 2 only		An agreement you made (such as mortgage or secured			
	Debtor 2 only Debtor 1 and Debtor 2	t only	car loan)			
	At least one of the deb		☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
			Other (including a right to offset)			
	Check if this claim	relates to a	- Other (moticaling a right to office)	-		
	community debt					
	Date debt was incurred		Last 4 digits of account number			
			Describe the property that secures the claim:	\$	\$	\$
	Creditor's Name			7		
	Number Street	***************************************				
	(Antitoe) Street			· ·		
			As of the date you file, the claim is: Check all that apply.			
			☐ Contingent			
	City	State ZIP Code	☐ Unliquidated			
			☐ Disputed			
	Who owes the debt? Ch	heck one.	Nature of lien. Check all that apply.			
	Debtor 1 only		☐ An agreement you made (such as mortgage or secured			
	Debtor 2 only		car loan)			
	Debtor 1 and Debtor 2	? only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the deb	*	Judgment lien from a lawsuit			
			Other (including a right to offset)			
	Check if this claim community debt	relates to a				
	•		1 - 1 2 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	Date debt was incurred		Last 4 digits of account number	F	···]	
	Add the dollar v	value of your entries	s in Column A on this page. Write that number here:	\$ 0.00)	
		-	add the dollar value totals from all pages.	\$ 0.00	ā	
	Write that numb		· · · · · · · · · · · · · · · · · · ·	\$	<u>'</u>	

Dρ	btor	1

Jasmine C. Johnson
First Name Middle Name

Last	Nam
------	-----

Case number	(if known)

Part 2:	List Others to Be Notified for a Debt That You Already Listed	

ou have mor	e than one creditor	ou for a debt you owe to s for any of the debts that y I, do not fill out or submit t	ou listed in Part 1, lis	creditor in Part 1, and then list the collection agency here. Similarly, it the additional creditors here. If you do not have additional persons to
e nounea roi	rany debts in Part 1	, ao not im out or subinit	uns page.	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name	***************************************		····	Last 4 digits of account number
Number	Street			
City		State	ZiP Code	
City		State		
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
Nullipel	Olleet			
City		State	ZIP Code	
1				On which line in Part 1 did you enter the creditor?
<u> </u>				Last 4 digits of account number
Name				Last 4 digits of account fulliber
Number	Street			
City		State	ZIP Code	
]				On which line in Part 1 did you enter the creditor?
J Name				Last 4 digits of account number
				- — — — — —
Number	Street			
	W			
_				
City		State	ZIP Code	·
1				On which line in Part 1 did you enter the creditor?
Name		,,		Last 4 digits of account number
Number	Street			
	4,444,444			
			70.	
City		State	ZIP Code	

Fil	in this information to identify your case:			
De	_{btor 1} Jasmine C. Johnson			
De	First Name Middle Name	Last Name		
	ouse, if filing) First Name Middle Name	Last Name		
Un	ited States Bankruptcy Court for the: Eastern District of	Michigan	F	Check if this is an
	se number known;)		_	amended filing
	ficial Form 106E/F			
Sc	chedule E/F: Creditors W	ho Have Unsec	ured Claims	12/15
List A/B cred need any	the other party to any executory contracts or under the other party to any executory contracts or under the other party to any executory contracts or under the contract of th	nexpired leases that could resulute G: Executory Contracts and d in Schedule D: Creditors Who he entries in the boxes on the lease (if known).	t in a claim. Also list executory contract Unexpired Leases (Official Form 106G). I Have Claims Secured by Property. If mo	ts on <i>Schedule</i> Do not include any ore space is
	Do any creditors have priority unsecured claims			
	 No. Go to Part 2. 	ayanısı your		
	Yes.			for each stains For
	List all of your priority unsecured claims. If a cre each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the c unsecured claims, fill out the Continuation Page of f	a claim has both priority and nonp laims in alphabetical order accord	riority amounts, list that claim here and sho ing to the creditor's name. If you have more	w both priority and e than two priority
	(For an explanation of each type of claim, see the ir	nstructions for this form in the instr		ority Nonpriority
				ount amount
2.1	Synchrony Bank- Art Van	Last 4 digits of account number	· <u>9 6 1 4</u> \$ 3,500.00 \$ 3,	500.00 \$
	Priority Creditor's Name PO Box 96530	When was the debt incurred?	11/16/2016	
	Number Street			
	Orlando FL 32896	As of the date you file, the claim	is: Check all that apply.	
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	Debtor 1 only	Turns of RDIODITY upps oursel	ataim	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured Domestic support obligations	Ciaini.	
	At least one of the debtors and another	Taxes and certain other debts y	ou owe the government	
	$oldsymbol{\square}$ Check if this claim is for a community debt	Claims for death or personal inj	*	
	is the claim subject to offset?	intoxicated		
	1 No ☐ Yes	Other. Specify furniture le	33113	
2.2	Progressive Leasing-Gardner white	Last 4 digits of account numbe	r <u>9 6 1 4</u> _{\$} 3,000.00 _{\$} 3	,000.00 _{\$}
	Priority Creditor's Name	When was the debt incurred?	12/13/2015	
	256 West Data Drive			
		As of the date you file, the clair	is: Check all that apply.	
	Draper UT 84020 City State ZIP Code	☐ Contingent☐ Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	☑ Debtor 1 only	Type of PRIORITY unsecured	claim:	
	Debtor 2 only	Domestic support obligations		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts y	ou owe the government	
	☐ At least one or the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal in	ury white you were	
	Is the claim subject to offset?	intoxicated Other. Specify furniture le	asing	
	✓ No ☐ Yes			

ebtor 1	Jasmine C	. Jonns
	First Manan	Middle Norm

r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority Nonprior amount amount
Aaron's Corporate Office	Last 4 digits of account number 9 6 1 4	\$ 2,500.00 \$ 2,500.0 \$
400 Galleria Parkway SE	When was the debt incurred? 09/01/2014	
Suite 300	As of the date you file, the claim is: Check all that apply.	
Atlanta GA 30339 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only	Domestic support obligations	
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were	
☐ Check if this claim is for a community debt	intoxicated ☑ Other. Specify rent to own furniture	
Is the claim subject to offset? ☑ No □ Yes		
Rent A Center Corporate Office	Last 4 digits of account number 9 6 1 5	\$ 2,000.00 \$ 2,000. 66 \$
5501 Headquarter Dr. Number Street	When was the debt incurred? 12/01/2017	
	As of the date you file, the claim is: Check all that apply.	
Plano TX 75024	☐ Contingent	
City State ZIP Code	☐ Unliquidated ☐ Disputed	
Who incurred the debt? Check one.	•	
Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government	
☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify rent to own furniture	
Is the claim subject to offset?		
✓ No ☐ Yes		ggydgy achana. Achan gagydg ggydd gag gal glad o conddd llawyd yn gyllog gagydg ggydd gagydd achan ach y dd di
36th District Court	Last 4 digits of account number 9 6 1 4	\$ 670.00 \$ 670.00 \$
Priority Creditor's Name Traffic Tickets Division Number Street	When was the debt incurred? 04/18/2016	
421 Madison	As of the date you file, the claim is: Check all that apply	
Detroit MI 48226	Contingent	
City State ZIP Code	☐ Unliquidated ☑ Disputed	
Who incurred the debt? Check one.	•	
☑ Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were	
☐ Check if this claim is for a community debt	intoxicated Other, Specify Various Traffic Tickets	
Is the claim subject to offset? ✓ No ☐ Yes		

Debtor 1	

Firet Name

Middle Name

Last	Na	me

Case number (if known)

Part 2: List A	ll of Your	NONPRIORITY	Unsecured	Claims
----------------	------------	-------------	-----------	--------

[Do any creditors have nonpriority uns No. You have nothing to report in this Yes						
r	List all of your nonpriority unsecured nonpriority unsecured claim, list the cred ncluded in Part 1. If more than one cred claims fill out the Continuation Page of P	litor separa itor holds a	tely for each claim	. For each claim listed, identify wha	at type of claim it is. Do not	list claims	s already
						Total c	laim
l.1	Chase Bank				9 6 1 4		
	Nonpriority Creditor's Name			Last 4 digits of account number		\$	750.00
	270 Park Avenue			When was the debt incurred?	10/07/2015		
	Number Street						
	New York	NY	10017	8	in Obarda all that analy		
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
				Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☑ Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another						
	_			Student loans Obligations arising out of a separations.	ration agreement or divorce		
	☐ Check if this claim is for a commun	nity debt		that you did not report as priority	claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing	g plans, and other similar debts		
	Ø №			Other, Specify bank charge	9S		
	Yes						
4.2	Detroit One Credit Union			Last 4 digits of account number	9 6 1 4	\$	500.00
	Nonpriority Creditor's Name			When was the debt incurred?	01/14/2016		
	630 Howard Street						
	Number Street			A 5 45	in Obert all that ample		
	Detroit	MI	48226	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	☑ Debtor 1 only			Disputed			
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	Debtor 1 and Debtor 2 only			Student loans			
	At least one of the debtors and another			Obligations arising out of a sepa	ration agreement or divorce		
	Check if this claim is for a communication	nity debt		that you did not report as priority	claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing	g plans, and other similar debts	ŀ	
	☑ No			Other. Specify personal lo	an		
	Yes	entire i menter i ritterior entre entre		r voor te oor wegetste trett program op spogste sprogramming op en programming op op op op the state tot de st	oloti viitettii tittiooju kiivoity tooja tojaoje toitti titti titti etoonoo oli oolitti viitti viitti.	on a company of the c	ggraf fennsterne freme fremnesse enternesse
4.3	Detroit Water & Sewerage De	partmen	t/Billina	Last 4 digits of account number	9614		2,500.00
	Nonpriority Creditor's Name	<u></u>	<u> </u>	When was the debt incurred?	03/05/2016	\$	2,300.00
	735 Randolph Street			Wiles was the debt mounted:			
	Number Street	5.41	40000				
	Detroit City	MI State	48226 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	•	Oldio	Zii Oddo	☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			✓ Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only						
	At least one of the debtors and another			Type of NONPRIORITY unsec	ured claim:		
	_			Student loans			
	Check if this claim is for a commu	nity debt		Obligations arising out of a sepa that you did not report as priority			
	ls the claim subject to offset?			Debts to pension or profit-sharing		3	
	₩ No			Other. Specify past due w			
	Yes						

De	htor	1

st Name Middle Name

Last Nam

Case number (if known)_____

Part 2:		
		-

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, nu	mber the	m beginning with	4.4, followed by 4.5, and so forth.		Total claim
	Best Bank Corporate office			Last 4 digits of account number	9 6 1 4	\$ 500.00
	Nonpriority Creditor's Name 3770 Data Drive #100			When was the debt incurred?	12/05/2015	
	Number Street Norcross	GA	30092	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.			☑ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a commun	nitv deht		Obligations arising out of a sepa you did not report as priority clai	ms	
	Is the claim subject to offset?	mty debt		Debts to pension or profit-sharin Other. Specify bank fees	g plans, and other similar debts	
	☑ No ☐ Yes				-	
	Comcast Cable Billing Departr	nent	ig dayay go bayaa aa aga baada da	Last 4 digits of account number	9 6 1 4	\$ <u>1,200.00</u>
	Nonpriority Creditor's Name 41112 Concept Dr.			When was the debt incurred?	06/02/2017	
	Number Street	MI	48170	 As of the date you file, the claim 	n is: Check all that apply.	
	Plymouth City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated☐☐ Disputed☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐		
	Debtor 1 only			Tune of MONDBIODITY upgood	rad alaim	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	rred Claim.	
	At least one of the debtors and another			Obligations arising out of a sepa		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority cla Debts to pension or profit-sharing		
	Is the claim subject to offset? ✓ No			✓ Other. Specify cable bill		
	Yes					_{\$} 1,250.00
	Direct TV/Billing Department Nonpriority Creditor's Name			Last 4 digits of account numbe	r <u>9 6 1 4</u> 05/14/2016	\$
	2230 E. Imperial Highway			When was the debt incurred?	03/14/2010	
	Number Street ELSegundo	CA	90245	As of the date you file, the claim	n is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent☐ Unliquidated		
	Who incurred the debt? Check one.			✓ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecu	ured claim:	
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a sep you did not report as priority cla	aration agreement or divorce that ims	
	☐ Check if this claim is for a commu Is the claim subject to offset?	nity debt		Debts to pension or profit-shari	ng plans, and other similar debts	
	No Yes			☑ Other. Specify <u>past due c</u>	anic viii	

Debtor 1

Jasmine C. Johnson
First Name Middle Name

Case number (if known)	
------------------------	--

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	Tyou do not have additional pr	ersons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Clair
		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
vanie		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City 	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured
		Claims —
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
·		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
OIL.	State ZIP Code	Last 4 digits of account number
City	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		· · · · · · · · · · · · · · · · · · ·
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
A1.	State ZIP Code	Last 4 digits of account number
City	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
Cib	State ZIP Cod	Last 4 digits of account number
City	State ZIP COO	

st Name Middle Nam

Last Name

Case number (if known)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$ 11,670.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$ 11,670.00	
			Total claim	
Total claims	6f. Student loans	6f.	\$	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$6,700.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$6,700.00	

Fill i	n this information to identify your case:		
Debt	or 1 Jasmine C. Johnson First Name Middle Name	Last Name	
Debt (Spou	OF 2 USE, if filing) First Name Middle Name	Last Name	
Unite	ed States Bankruptcy Court for the: Eastern District of	Michigan	
Case (If kn	e number own)		☐ Check if this is an amended filing
Offi	icial Form 106E/F		
	hedule E/F: Creditors W	ho Have Unsecu	ired Claims 12/15
List to A/B: I credit needs	he other party to any executory contracts or ur Property (Official Form 106A/B) and on Schedu tors with partially secured claims that are listed ed, copy the Part you need, fill it out, number the dditional pages, write your name and case num	expired leases that could result le G: Executory Contracts and La I in Schedule D: Creditors Who I te entries in the boxes on the left aber (if known).	nims and Part 2 for creditors with NONPRIORITY claims. in a claim. Also list executory contracts on Schedule Inexpired Leases (Official Form 106G). Do not include any Have Claims Secured by Property. If more space is ft. Attach the Continuation Page to this page. On the top of
	o any creditors have priority unsecured claims		:
	No. Go to Part 2.	agamst you :	
	Yes.		
ea no	ach claim listed, identify what type of claim it is. If a onoriority amounts. As much as possible, list the cl	claim has both priority and nonpri aims in alphabetical order accordir	nsecured claim, list the creditor separately for each claim. For iority amounts, list that claim here and show both priority and ing to the creditor's name. If you have more than two priority lds a particular claim, list the other creditors in Part 3.
(F	For an explanation of each type of claim, see the in	structions for this form in the instru	
			Total claim A Priority A Nonpriority amount amount
2.1	Manay was a constitution wide		9 6 1 4 \$ 89.00 \$ 89.00 \$
	Money recovery Nationwide Priority Creditor's Name	Last 4 digits of account number	
	8155 Executive Court	When was the debt incurred?	01/24/2014
	Number Street Ste 10	As of the date you file, the claim	is: Chark all that anniv
	Lansing MI 48917	Contingent	is. Onook all mat apply.
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one. ☑ Debtor 1 only	Disputed	
	Debtor 2 only	Type of PRIORITY unsecured of	claim:
	Debtor 1 and Debtor 2 only	Domestic support obligations	
	At least one of the debtors and another	Taxes and certain other debts yo	u owe the government
	☐ Check if this claim is for a community debt	Claims for death or personal inju	ry while you were
	Is the claim subject to offset? ✓ No ☐ Yes	intoxicated Other. Specify Emergency	Physician
2.2	Transworld System	Last 4 digits of account number	9 6 1 4 _{\$} 100.00 _{\$} 100.00 _{\$}
	Priority Creditor's Name	When was the debt incurred?	02/07/2017
	PO Box 15270	When was the debt mountain	- Contracti
		As of the date you file, the claim	is: Check all that apply.
	Wilmington DE 19850	☐ Contingent☐ Unliquidated	
	City State ZIP Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of PRIORITY unsecured	claim:
	Debtor 2 only	Domestic support obligations	orani.
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts yo	ou owe the government
	☐ Check if this claim is for a community debt	Claims for death or personal inju	ry while you were
	Is the claim subject to offset?	intoxicated Other. Specify Beaumont	Grosse Pointe
	✓ No Yes	_ Showing	

Debtor	1

First Name Middle Name

Last Name

Case number (if known),_____

46		to the last of the	·	stal alaim	Belasta	
Afte	r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	1	otal claim	Priority amount	Nonpriority amount
	Check N Go Corporate Office	Last 4 digits of account number 9 6 1 4	\$_	676.00	\$ 676.00	\$
	Priority Creditor's Name 4824 Socialville Foster R	When was the debt incurred? 12/01/2016				
	Number Street Legal department	As of the date you file, the claim is: Check all that apply.				
	Legal department					
	Mason OH 45040 City State ZIP Code	☐ Contingent ☐ Unliquidated				
	City State ZIP Code Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government				
	At least one of the debtors and another	Claims for death or personal injury while you were				
	☐ Check if this claim is for a community debt	intoxicated				
		☑ Other. Specify Payday loan				
	Is the claim subject to offset?					
	M No					
	☐ Yes		depression of	enverencemente victural in c	yaanaa aa a	
	20th District Court of Dearborn Heigh	Last 4 digits of account number 9 6 1 4	\$	700.00	s 700.00	\$
	Priority Creditor's Name	Last 4 digits of account number	Ψ_			Ψ
	25637 Michigan Ave	When was the debt incurred? 11/24/2016				
	Number Street					
	Ticket Division	As of the date you file, the claim is: Check all that apply.				
	Dearborn Heights MI 48125	Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☑ Disputed				
	Debtor 1 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government				
	At least one of the debtors and another	Claims for death or personal injury white you were				
	☐ Check if this claim is for a community debt	intoxicated				
	·	☑ Other, Specify Traffic Tickets				
	Is the claim subject to offset?					
	No					
	Yes		DAVIN-DHEH-	and the return to the return to the state of	on comment and an arrival desiration and a	and a few transfers of the manuscriptures of constants, the manuscriptures of the second seco
	45th District Court of Oak Park	Last 4 digits of account number 9 6 1 4	\$_	600.00	\$ <u>600.00</u>	\$
	Priority Creditor's Name	0010470047				
	13600 Oak park Blvd.	When was the debt incurred? 03/04/2017				
	Ticket Division	As of the date you file, the claim is: Check all that apply	',			
	Oak Park MI 48237 City State ZIP Code	☐ Contingent☐ Unliquidated				
	III Jour	☑ Disputed				
	Who incurred the debt? Check one.					
	☑ Debtor 1 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only	☐ Domestic support obligations				
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government				
		 Claims for death or personal injury while you were intoxicated 	10,000			
	☐ Check if this claim is for a community debt	Other. Specify Traffic Tickets				
	is the claim subject to offset?	-				
	M No					
	Yes					

Debtor	1	

irst Name Middle Name

Last Name

Case number	(if known)	

Part 2: List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes				
i i	nonpriority unsecured claim, list the creditor separately for each claim.	rder of the creditor who holds each claim. If a creditor has more than one For each claim listed, identify what type of claim it is. Do not list claims already at the other creditors in Part 3.If you have more than three nonpriority unsecured			
		Total claim			
.1	43rd Hazel Park Ticket Division	Last 4 digits of account number 9 6 1 4			
	Nonpriority Creditor's Name	00/00/0040			
	111 E. 9 Mile Rd.	When was the debt incurred? U9/06/2016			
	Number Street Hazel Park MI 48030				
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	Who incurred the debt? Check one.	☐ Unliquidated			
	Debtor 1 only	Disputed			
	Debtor 2 only	T of NOND DIODITY			
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
		 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce 			
	☐ Check if this claim is for a community debt	that you did not report as priority claims			
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts			
	☑ No ☐ Yes	Other Specify Traffic Tickets			
1.2	37th District Court/Traffic Division	Last 4 digits of account number 9 6 1 4 \$ 800.00			
	Nonpriority Creditor's Name	When was the debt incurred? 04/01/2016			
	8300 Common Rd				
	Warren MI 48093	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	☐ Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Student loans			
	At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce			
	☐ Check if this claim is for a community debt	that you did not report as priority claims			
	is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. SpecifyTraffic Tickets			
	☑ Yes	Cales. Specify			
.3	Nonpriority Creditor's Name	\$11,100.00			
	421 maleson	When was the debt incurred?			
	Number Street				
	Detroit mt 48220	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	Uniquidated			
	Debtor 1 only	Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	□ Student loans □ Obligations arising out of a separation agreement or divorce			
	Is the claim subject to offset?	that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Prother. Specify Children than the Constraint of			
		Net us sessible			

De	btor	1

Jasmine C. Johnson
First Name Middle Name

Case number (if known)

0.04	ъ.
-CILL	

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beg	inning with 4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	*
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP (Code Contingent Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	☐ No ☐ Yes		
	M and M and M and M are the second constant of the second constant M and M are the second M are the second M and M are the second M are the second M are the second M and M are the second M are the second M and M are the second M are the second M and M are the second M are the second M and M are the second M are the second M and M are the second M are the second M and M are the second M are the second M are the second M and M are the second M are the second M and M are the second M are the second M are the second M and M are the second M are the	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP (Code Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☐ No ☐ Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP	Code Contingent Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	☐ Yes		

Debtor 1

Jasmine C. Johnson

Case number (if known)_____

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	On Which entry his art volvatize did you list the original ordinors
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	□ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Judo En Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Only During All Own Control of the C	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims

Debtor 1

Jasmine C. Johnson

First Mama

Middle Name

Last Name

Case number (if known)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total clai	m
Total claims	6a. Domestic support obligations	6a. <u>\$</u>	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b. _{\$}	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} + _{\$}	2,165.00
	6e. Total. Add lines 6a through 6d.	6e.	2,165.00
		Total clai	im
Total claims	6f. Student loans	6f. \$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$	0.00 13,41600
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$	
	6j. Total. Add lines 6f through 6i.	6j.	Co. 441,El

Fill in this information to identify your case:			
Debtor 1 Jasmine C. Johnson			
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name	,	
United States Bankruptcy Court for the: Eastern District of	Michigan		Check if this is an
Case number (If known)	, , , , , , , , , , , , , , , , , , ,		amended filing
Official Form 106E/F			
Schedule E/F: Creditors W	ho Have Unsecu	red Claims	12/15
Be as complete and accurate as possible. Use Part List the other party to any executory contracts or ur A/B: Property (Official Form 106A/B) and on Scheducreditors with partially secured claims that are listed needed, copy the Part you need, fill it out, number that any additional pages, write your name and case nur	nexpired leases that could result in the G: Executory Contracts and Ur If in Schedule D: Creditors Who H The entries in the boxes on the left.	in a claim. Also list executory contract nexpired Leases (Official Form 106G). I lave Claims Secured by Property. If mo	ts on Schedule Do not include any ore space is
Part 1: List All of Your PRIORITY Unsecure	d Claims		
 Do any creditors have priority unsecured claims No. Go to Part 2. 	against you?		:
Yes.			
 List all of your priority unsecured claims. If a creeach claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the cunsecured claims, fill out the Continuation Page of I 	a claim has both priority and nonprio laims in alphabetical order accordin Part 1. If more than one creditor hold	ority amounts, list that claim here and sho g to the creditor's name. If you have more is a particular claim, list the other creditor	w both priority and than two priority
(For an explanation of each type of claim, see the ir	structions for this form in the instruc		ority Nonpriority
		am	ount amount
Credit Acceptance Corp Priority Creditor's Name	Last 4 digits of account number _	9 6 1 4 \$ 11,665.00 \$ 11	I,665. 6 \$
PO Box 5070	When was the debt incurred?	<u>03/01/201</u> 6	
Number Street	As of the date you file, the claim is	s: Check all that apply	
Southfield MI 48086 City State ZIP Code	Contingent	or or one of the original or	
Who incurred the debt? Check one.	Unliquidated		
☑ Debtor 1 only	Disputed		
☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:	
At least one of the debtors and another	 □ Domestic support obligations □ Taxes and certain other debts you 	the annual control	
Check if this claim is for a community debt	Claims for death or personal injury	•	
is the claim subject to offset?	intoxicated Other. Specify Repossession		
☑ No ☑ Yes	Other, Specify <u>Trepossessic</u>	111	
Honor Finance Corp	Last 4 digits of account number	9 6 1 4 _{\$} 2,697.00 _{\$} 2,	,697.00 _{\$}
Priority Creditor's Name 909 Davis Street Suite		11/26/2012	· · · · · · · · · · · · · · · · · · ·
Number Street	As of the date you file, the claim i	ic. Check all that apply	
Evanston IL 60201	Contingent	S. Check all blacappy.	
Evanston IL 60201 City State ZIP Code	Unliquidated		
Who incurred the debt? Check one.	Disputed		
☑ Debtor 1 only☑ Debtor 2 only	Type of PRIORITY unsecured c	laim:	
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you 	Laws the government	
At least one of the debtors and another	☐ Claims for death or personal injury		
☐ Check if this claim is for a community debt	intoxicated	•	
Is the claim subject to offset? ☑ No	Other. Specify charge-off		
Yes			

De	htor	4

Jasmine C. Johnson First Name Middle Name

Last Name

Case number (if known)_

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority Nonprior amount amount
Santander Consumer USA	Last 4 digits of account number 9 6 1 4	\$ 11,766.0m \$ 11,766m \$
Priority Creditor's Name PO Box 961245 Number Street	When was the debt incurred? 11/27/2012	
Number Seet	As of the date you file, the claim is: Check all that apply.	
Fort Worth TX 75161 City State ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed	
Who incurred the debt? Check one.		
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Domestic support obligations	
☐ At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were	
☐ Check if this claim is for a community debt	intoxicated	
Check if this claim is for a community debt	Other, Specify Charge-off	
ls the claim subject to offset? ☑ No □ Yes		
Account Services	Last 4 digits of account number 9 6 1 4	\$ 1,369.00 \$ 1,369. ₩ \$
Priority Creditor's Name		
Billing Department Number Street 4/0	When was the debt incurred? 01/14/2015	
1802 NE Loop/s Ste 400	As of the date you file, the claim is: Check all that apply.	
San Antonio TX 78217	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☑ Disputed	
☑ Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only	☐ Domestic support obligations	
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	
At least one of the debtors and another	☐ Claims for death or personal injury while you were	
lacksquare Check if this claim is for a community debt	intoxicated Other. Specify St. John Oakland Hosp	
Is the claim subject to offset? ☑ No □ Yes	ar sanda kanding ng n	
Amcol Systems Inc. Priority Creditor's Name	Last 4 digits of account number 9 6 1 4	\$ 1,340.00 \$ 1,340. 96 \$
PO Box 21625 Number Street	When was the debt incurred? $05/31/2018$	
	As of the date you file, the claim is: Check all that apply.	
Columbia SC 29221	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☑ Disputed	•
Debtor 1 only	Type of PRIORITY unsecured claim:	
Debtor 2 only		
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government	
☐ At least one of the debtors and another	Claims for death or personal injury white you were	
☐ Check if this claim is for a community debt	intoxicated Other. Specify St. John Hospital	
Is the claim subject to offset?		
₩ No		

_		
De	btor	1

_	_	•	•	•	_	_
	44			_		_

Case number (if known)

Par	t 2: List All of Your NONPRIORIT	Y Unse	cured Clain	ns		
3.	Oo any creditors have nonpriority unsec	ured cla	ims against y	/ou?		
	No. You have nothing to report in this p ✓ Yes	art, Subr	nit this form to	the court with your other schedules.		:
ı i	nonpriority unsecured claim, list the credito	r separat holds a	ely for each cl	al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not m, list the other creditors in Part 3.If you have more than three nor	list claim	ns already
	Salino ili ode dio continuation i ago of i al				Total	claim
1	Americollect			Last 4 digits of account number 9 6 1 4	œ	1,973.00
	Nonpriority Creditor's Name 1851 ≤ Aleverno Rd			When was the debt incurred? 06/27/2014	Ψ	.,
	Number Street		54000	_		
	Manitowoc V		54220 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a community	debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	□ No			Other, Specify Universitt Pediatrician		
	☑ Yes				vanningarienbertvenber	D455504,05m2,4,0000550054573,65544
.2	Arbor Professional Solutions	***************************************		Last 4 digits of account number $\frac{9}{04/30/2014}$	\$	60.00
	Nonpriority Creditor's Name			When was the debt incurred? 04/30/2014		
	2090 S. Main Street			<u> </u>		
	Ann Arbor N		48103	As of the date you file, the claim is: Check all that apply.		
	City St	ale	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only Debtor 2 only			•		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce 		
	☐ Check if this claim is for a community	/ debt		that you did not report as priority claims		
	is the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other, Specify Macomb Ambulance 	i	
	☑ No ☑ Yes					
.3			and the second		portugues estat	ammente esta proportional proportion
	Diversified Consultants Nonpriority Creditor's Name			Last 4 digits of account number <u>9 6 1 4</u> When was the debt incurred? 11/24/2014	\$	644.00
	PO Box 551268			when was the dept incurred?		
	Number Street Jacksonville	-L	32255			
		ate	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONDRIORITY unconstrain claims		
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a communit	y debt		 Student loans Obligations arising out of a separation agreement or divorce 		
	Is the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	Q.	
	₩ No			✓ Other. Specify <u>Sprint</u>		

·	, Car	211	•
	First	Na	п

ıe	Middle Name	Last	N

a –	

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning v	with 4.4, followed by 4.5, and so forth.	То	tal claim
	Enhanced Recovery Company	Last 4 digits of account number 9 6 1 4	\$	928.00
	Nonpriority Creditor's Name PO Box 57547	When was the debt incurred? 01/11/2017		
	Number Street	As of the date you file, the claim is: Check all that apply.		
	Jacksonville FL 32241			
	City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☑ Disputed		
	✓ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community debt is the claim subject to offset? ☑ No ☐ Yes	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify AT7T Direct TV		
	Enhanced Recovery Company	Last 4 digits of account number 9 6 1 4	\$	972.00
	Nonpriority Creditor's Name PO Box 57547	When was the debt incurred? $\frac{11/06/2017}{11/06/2017}$		
	Number Street	As of the date you file, the claim is: Check all that apply.		
	Jacksonville FL 32241			
	City State ZIP Code	☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one.	☑ Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans		
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No ☐ Yes	Other. Specify T-Mobile		
	Mid-Michigan CB	Last 4 digits of account number 9 6 1 4	\$	197.00
	Nonpriority Creditor's Name PO Box 130	When was the debt incurred? 02/09/2014		
	Number Street Saint Johns MI 48879	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.	☑ Disputed		
	Debtor 1 only	The CANONIAN CONTRACTOR OF THE		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that 		
	☐ Check if this claim is for a community debt	you did not report as priority claims		
	·	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify University Pediatricians		
	Is the claim subject to offset? ☑ No ☐ Yes	Other. Specify University Pediatricians		

Debtor 1

Jasmine C. Johnson
First Name Middle Name

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	Last 4 digits of account flamour
	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
мирот первы дол на година от ит притечни потите сторуения со в год и на на на се в году на филосов на быт по по принципа на пр	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check and): A Part 1: Craditors with Priority Lineau and Claims
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
CITY STATE AT COME	

Debtor 1

Jasmine C. Johnson

rst Name Middie Name

ame Last Name

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	30,177.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	30,177.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	C: Other Add all ather represents upon our od alaima		•	4,774.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ s	